

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JL		11/1/02
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	EW	64837	2800
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	⑥		3-1-02
2	✓		2-15-02
3	✓		7-2-02
4	✓		11-25-02
5	✓		
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23	✓	✓	✓
24	✓	✓	✓
25	✓	✓	✓
26	✓	✓	J
27	✓	✓	✓
28	✓	✓	✓
29	✓	✓	✓
30	✓		
31	✓	✓	✓
32	✓	✓	✓
33	✓	✓	J
34	✓	✓	✓
35	✓	✓	✓
36	✓	✓	✓
37	✓	✓	✓
38	✓	✓	✓
39	✓	✓	
40	V	✓	✓
41		✓	✓
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If more than 150 claims or 10 actions  
staple additional sheet here

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